

# 2012 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

DOCUMENT# 763229

FILED  
Jan 26, 2012  
Secretary of State

**Entity Name:** NORTHRIDGE PROFESSIONAL CONDOMINIUM ASSOCIATION, INC.

**Current Principal Place of Business:**

5333 N. DIXIE HIGHWAY  
FT LAUDERDALE, FL 33308

**New Principal Place of Business:**

**Current Mailing Address:**

2100 E. COMMERCIAL BLVD.  
C/O THEODOR LEHRER  
FT. LAUDERDALE, FL 33308

**New Mailing Address:**

**FEI Number:** 59-2193059

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

THEODOR LEHRER, M.D.  
2100 E. COMMERCIAL BLVD.  
FT LAUDERDALE, FL 33308 US

**Name and Address of New Registered Agent:**

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: \_\_\_\_\_

Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: MD  
Name: LEHRER, THEODOR  
Address: 2100E COMMERCIAL BLVD  
City-St-Zip: FT LAUDERDALE, FL 33308

Title: MD  
Name: TASLIIMI, KAMAL  
Address: 5333 N DIXIE HWY  
City-St-Zip: OAKLAND PARK,, FL 33308

Title: MD  
Name: HOFFMAN, JOSEPH  
Address: 5333 N. DIXIE HIGHWAY  
City-St-Zip: OAKLAND PARK,, FL 33308

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: THEODOR LEHRER

MD

01/26/2012

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date